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| Fill in this information to identify your case: | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pá | art 1: Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Oscar | |
| | Write the name that is on | First name | First name |
| | your government-issued | A Middle name | Middle name |
| | picture identification (for example, your driver's | Avila | Wildlie Harie |
| | license or passport | Last name | Last name |
| | Bring your picture | Jr | |
| | identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | Middle name | Middle name |
| | Include your married or | Middle Harrie | Middle name |
| | maiden names. | Last name | Last name |
| | | Fire | Financia |
| | | First name | First name |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 9630 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number | 9 xx - xx- | 9 xx - xx- |
| | (ITIN) | | |

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| D | ebtor 1 Oscar First Name | A Avila Middle Name Last Name | Case number (if known) |
|--|---|---|--|
| | T II OL TRAINS | Initiation takes | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1470 N 1st Ave, Apt 6 Number Street | Number Street |
| | | Melrose Park Illinois 60160 | |
| | | City State Zip Code Cook | City State Zip Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Oscar | | Α | | Avila | | Case number (if kno | own) |
|--|---|---|--|---|--|---|---|
| First N | | Middle Nan | | Last Name | | | |
| Part 2: Tell t | he Court Abo | ut Your Bankrup | tcy Case | | | | |
| 7. The chap Bankrupt are choos under | cy Code you | | | on of each, see <i>No</i> go to the top of pa | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you v | will pay the | more details cashier's che may pay with I need to pay Individuals to judge may, b the official poyou choose to | about how you ck, or money o a credit card the fee in ins p Pay Your File at my fee be w ut is not requi poverty line that | u may pay. Typica order If your attoor check with a p estallments. If your ing Fee in Installing vaived (You may red to, waive your a applies to your to u must fill out the | ally, if your orney is re-printed a choose ments (Correquest or fee, and family si | ou are paying the submitting your ed address. this option, sig official Form 103. this option only d may do so only ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney an and attach the <i>Application for</i> (A). If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you bankrupto last 8 yea | y within the | ✓ No. Yes. District District District | | | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any b cases per being filed spouse w filing this you, or by partner, o affiliate? | ding or I by a no is not case with a business | No. Yes. Debtor District Debtor District | | | When When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you re residence | | ✓ No. | r landlord obtai Go to line 12. | tatement About an | | | you want to stay in your residence? St You (Form 101A) and file it with |

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Avila Debtor 1 Oscar __ Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Oscar A Avila Case number (if known)
First Name Middle Name Last Name

| Part 5: Exp | lain Your Effo | rts to Receive a Brie | fing About Credit Counseling | | | | |
|---|---|---|--|--|--|---|--|
| | | About Debtor 1: | | About Deb | otor 2 (Sp | oouse Only in a Joint Cas | e): |
| 15. Tell the o | court | You must check one: | | You must cl | heck one: | | |
| whether received about cr counseli | edit | counseling agen | ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion. | counse filed thi | ling ager is bankru | ing from an approved cred ncy within the 180 days be ptcy petition, and I receive apletion. | fore I |
| | equires that ve a briefing | | he certificate and the payment plan, veloped with the agency. | | | he certificate and the payme veloped with the agency. | nt plan, |
| about cre counseling file for ba You mus | edit ng before you ankruptcy. t truthfully | counseling agen | ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion. | counse filed thi | ling ager is bankru | ing from an approved creating within the 180 days being the petition, but I do not appletion. | fore I |
| you cann | e of the choices. If ot do so, you igible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | ST file a c | er you file this bankruptcy pe opy of the certificate and pay | |
| If you file a court can o case, you whatever f paid, and y creditors o | anyway, the dismiss your will lose filing fee you | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | from an obtain t made n | n approve those sen ny reques 30-day te | ked for credit counseling sed agency, but was unable vices during the 7 days after, and exigent circumstancemporary waiver of the | to ter I |
| | s can begin on activities | can begin | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this | requirer efforts y unable t | ment, atta ou made to obtain i | ay temporary waiver of the ch a separate sheet explainir to obtain the briefing, why yo the before you filed for bankrupumstances required you to file |
| | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | with you | | e dismissed if the court is diss for not receiving a briefing b ruptcy. | |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | receive must file with a co | a briefing a certification | fied with your reasons, you n within 30 days after you file. ate from the approved agend payment plan you develope o, your case may be dismisse | You cy, along ed, if any. |
| | | | he 30-day deadline is granted only mited to a maximum of 15 days. | | | he 30-day deadline is grante mited to a maximum of 15 da | |
| | | I am not required counseling beca | d to receive a briefing about credit ause of: | | t require | d to receive a briefing abou ause of: | ıt credit |
| | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | Inca | apacity. | I have a mental illness or a deficiency that makes me incapable of realizing or ma rational decisions about fina | aking |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | ☐ Disa | ability. | My physical disability cause be unable to participate in briefing in person, by phon- through the internet, even a reasonably tried to do so. | a e, or |
| | | Active duty. | I am currently on active military duty in a military combat zone. | Acti | ive duty. | I am currently on active mili duty in a military combat zo | |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | about ci | redit cour | are not required to receive a seling, you must file a motion ounseling with the court. | |

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| Debtor 1 Oscar First Name | | Avila Case | e number (if known) | | | |
|---|---|--|--|----------------------------|--|--|
| | estions for Reporting Purposes | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily | consumer debts? Consum primarily for a personal, fan business debts? Business nvestment or through the op | ner debts are defined in 11 U.S.C. § 10 mily, or household purpose." debts are debts that you incurred to ol peration of the business or investment er debts or business debts. | otain | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fu | | any exempt property is excluded and admoute to unsecured creditors? | inistrative | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |) | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 10 billion \$50 billion | | |
| 20. How much do you estimate your liabilities to be? | | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 10 billion \$50 billion | | |
| Part 7: Sign Below | | - d I - d d | f | : | | |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | /s/ Oscar Avila | * | : | | | |
| | Signature of Debtor 1 | | Signature of Debtor 2 | | | |
| | Executed on 11/9/2017 MM / DD | / YYYY | Executed onMM / DD / YYYY | | | |

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| Debtor 1 Oscar | Α | Avila | Case number (if k | nown) |
|--|---------------------------|-------------------------|-----------------------------|--|
| First Name | Middle Name | Last Name | <u> </u> | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | , or 13 of title 11, United | ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § 3 | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the i | nformation in the schedu | ules filed with the petition is incorrect. |
| attorney, you do not | • | . , | | · |
| need to file this page. | /s/ Elizabeth Placek | | Date | 11/9/2017 |
| | Signature of Attorney | | M | M / DD / YYYY |
| | g, | | | |
| | | | | |
| | Elizabeth Placek | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3124477838 | Email address | eplacek@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-------------|----------------------|---|--|--|--|--|
| Debtor 1 | Oscar | Α | Avila | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | , | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | | | |
| | | | (State) | | | | | |
| Case number (If known) | | | | | | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | <u>-</u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,500.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,500.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$30,985.80 |
| Your total liabilities | \$30,985.80 |
| Part 3: Summarize Your Income and Expenses | |
| and Cummanize to an intestine and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,300.10 |
| | |
| | |

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Avila Debtor 1 Oscar _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,454.59 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$100.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$100.00

9g. Total. Add lines 9a through 9f.

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| Cill in this | information | to identify your | 000' | | | | | |
|---|--|--|---|--------------------------------------|--|------------------------------|---|---|
| FIII IN THIS | information | to identify your c | ase: | | | | | |
| Debtor 1 | Oscar First N | | A Niddle N | | Avila | - | | |
| Debtor 2 | FIISLIV | varne | Middle N | ame | Last Name | | | |
| (Spouse, if f | iling) First N | lame | Middle N | ame | Last Name | = | | |
| United St | ates Bankrupt | tcy Court for the: | Northern | | District of Illinois (State) | - | | |
| Case nun | nber | | | | (Otate) | _ | | |
| Officia | al Form | 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A/ | B: Prope | rty | | | | | 12/1 |
| category responsib write you Part 1: | where you the for supply remainded and continued and conti | nink it fits best. It ing correct infor case number (if k Each Residenc | Be as complete a mation. If more sp mown). Answer ev ee, Building, Lar | nd acc pace i very q nd, or | Other Real Estate You Own | d people ar et to this fo | e filing together, both a orm. On the top of any a an Interest In | re equally |
| 1. Do you | No. Go to P | | quitable interest i | n any | residence, building, land, or sim | ilar proper | ty? | |
| 1.1 | | ss, if available, or | other description | | t is the property? Check all that a Single-family home Duplex or multi-unit building | oply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the |
| | Number | Street | | | Condominium or cooperative Manufactured or mobile home and | | entire property? | portion you own? |
| | City | State | Zip Code | H | nvestment property Timeshare Other | | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | | one. | has an interest in the property? | Check | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only St least one of the debtors and ano | ther | | |
| | | | | Othe | er information you wish to add al erty identification number <u>:</u> | | em, such as local | |
| If you | | more than one, li | | | t is the property? Check all that a Single-family home | oply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. |
| | | | | | Ouplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number | Street | Zip Code | Ħ, | and nvestment property imeshare other | | Describe the nature of interest (such as fee sthe entireties, or a life | imple, tenancy by |
| | Oity | State | Zip Code | Who one. | has an interest in the property? Debtor 1 only | Check | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 2 only Debtor 1 and Debtor 2 only | | | |
| | | | | | at least one of the debtors and ano | | em, such as local | |
| | | | | | erty identification number: | | , 54511 45 15541 | |

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| Debtor 1 | | Α | Avila | Case number | (if known) | |
|---------------------------------------|---|-------------------|--|--------------------|---|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 <u>Stree</u> | et address, if available, or ot | her description | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | t apply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nur City | mber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by e estate), if known. |
| | | | Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Other information you wish to add | nother | (see instructions) | mmunity property |
| 2. Add | the dollar value of the po | rtion vou own for | property identification number: all of your entries from Part 1, incl | luding anv entrie: | s for pages | |
| | ve attached for Part 1. W | - | - | 3. 7 | | |
| Do you ov you own t 3. Cars, va | hat someone else drives. If yans, trucks, tractors, sport uno | equitable interes | st in any vehicles, whether they are , also report it on Schedule G: Executo rrcycles | - | - | |
| 3.1 | | | Who has an interest in the proone. Debtor 1 only | pperty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a | nd another | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community instructions) | y property (see | | |
| 3.2 | Make Model: Year: | | Who has an interest in the proone. Debtor 1 only | operty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| Oscar First Name | A Middle Name | Avila Last Name | Case numbe | (if known) | |
|---|---|--|--|--|--|
| Make Model: Year: Approximate mileage: Other information: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt | only ors and another | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| Make Model: Year: Approximate mileage: Other information: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt | only ors and another | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| nples: Boats, trailers, motors No Yes Make Model: | | Who has an interest in th | s, motorcycle accessorie | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D</i> : |
| Year: Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt | ors and another | Current value of the entire property? | Current value of the portion you own? |
| Make Model: Year: Approximate mileage: Other information: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | only | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims <i>Secured by Property.</i> Current value of the portion you own? |
| | Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: Percraft, aircraft, motor homeles: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Approximate mileage: | Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: Percraft, aircraft, motor homes, ATVs and other inples: Boats, trailers, motors, personal watercraft, for the series of the s | Model: Year: Approximate mileage: Other information: Other information: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: Other inform | Model: Year: Approximate mileage: Other information: Debtor 1 and Debtor 2 only Check if this is community property (see instructions) Make Model: Year: Debtor 1 only Approximate mileage: Debtor 1 only Approximate mileage: Debtor 1 only Debtor 2 only Other information: Debtor 1 only Debtor 2 only Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Percraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and acceptes: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Make Model: Year: Debtor 1 only Debtor 2 only Debtor 2 only Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property? Check one. Debtor 1 only Debtor 2 only Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Make Model: Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only | Model: Year: Debtor 1 only Current value of the entire property? |

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| De | ebtor 1 | Oscar First Name | A Middle Name | Avila Last Name | Case number (if known) | |
|----------------------|-------------------------|------------------------------|--|---------------------------------|------------------------------------|--|
| Pa | rt 3: | Describe Y | our Personal and Household | | | |
| D | o you | own or hav | e any legal or equitable intere | est in any of the following | ng items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Examp | _ | and furnishings iances, furniture, linens, china, kitch | enware | | |
| ✓ | No Yes. [| Describe | Used Furniture | | | \$300.00 |
| | | tronics bles: Televisions | and radios; audio, video, stereo, ar | nd digital equipment; compu | ters, printers, scanners; music | |
| V | Yes. [| Describe | Used Electronics - 2 TV's, 2 Game S | Systems, 1 Phone | | \$700.00 |
| | Examp | | ue nd figurines; paintings, prints, or oth in, or baseball card collections; other | | | |
| | No Yes. [| Describe | | | | |
| | | les: Sports, ph | rts and hobbies otographic, exercise, and other hobl s; carpentry tools; musical instrumer | | I tables, golf clubs, skis; canoes | |
| ✓ | No | , | , , | | | |
| | Yes. [| Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and relat | ted equipment | | |
| ✓ | No | - · | | | | |
| Ш | Yes. L | Describe | | | | |
| | - | | clothes, furs, leather coats, designer | wear, shoes, accessories | | |
| | No Voc. 1 | Describe | Lland Clathin a | | | |
| ⊻ | 165. 1 | Jeschbe | Used Clothing | | | \$300.00 |
| | | - | ewelry, costume jewelry, engagemer r | nt rings, wedding rings, heirld | oom jewelry, watches, gems, | |
| | No Yes. [| Describe | | | | |
| | | n-farm animal | | | | |
| | Examp No | oles: Dogs, cats | , שוועט, ווטוטטט | | | |
| <u>✓</u> | | Describe | Schnoodle | | | \$25.00 |
| _ | _ | other person | al and household items you did n | ot already list, including a | ny health aids you did not list | |
| $oldsymbol{arDelta}$ | No Van 1 | O a a a willa : | | | | |
| Ц | Yes. [| Describe | | | | |
| | | | lue of all of your entries from Par number here | t 3, including any entries f | or pages you have attached | \$1325.00 |

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| Debto | or 1 Oscar First Name | A Middle Name | Avila Last Name | Case number (if known) | |
|--------------|---|--|---------------------------|---|---|
| Part 4 | | | <u> </u> | | |
| | | y legal or equitable interest | in any of the followin | g? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | amples: Money you ha | ve in your wallet, in your home, in | | n hand when you file your petition Cash: | |
| | | avings, or other financial accounts stitutions. If you have multiple acc | | ares in credit unions, brokerage houses, | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: 17.2. Checking account: | Huntington Bank | | \$300.00 |
| | | 17.3. Savings account: | Huntington Bank | | \$0.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | · <u></u> |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| | Examples: Bond funds, | or publicly traded stocks investment accounts with broker | age firms, money market a | accounts | |
| | Ves No | Institution or issuer name: | | | |
| | | | | | |
| | | | | | |
| | Non-publicly traded s an LLC, partnership, a | | ted and unincorporated | businesses, including an interest in | |
| | No Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | 210111 | | | | |

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| Debt | tor 1 Oscar | A Middle Negree | Avila | Case number (if known) | |
|------|--|---|-----------------------------|--|----------|
| 20. | | Middle Name | | | |
| | | include personal checks, cashiers' ents are those you cannot transfel | | | |
| | Yes. Give specific information about them | Issuer name: | | | |
| | | - | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in IF | | , thrift savings accoun | ts, or other pension or profit-sharing plans | |
| | No✓ Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | w/ employer | | \$975.00 |
| | sopulatory. | Pension plan: | | | |
| | | IRA: | | | _ |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Examples: Agreements v | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | No ✓ Yes | Electric: | mattation name. | | |
| | | Gas: | | | |
| | | Heating oil: | | | - |
| | | Security deposit on rental unit: | w/ lanlord | | \$900.00 |
| | | Prepaid rent: | | | - |
| | | Telephone: | | | <u> </u> |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | | or a periodic payment of money to | you, either for life or for | or a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | _ | | | | |
| | | | | | · - |
| | | | | | |

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| Debt | tor 1 Oscar | A Middle News | Avila | Case number (if known) | |
|------|---|---|--|--|---|
| 0.4 | First Name | Middle Name | Last Name | | |
| 24. | | (b)(1), 529A(b), and 529(b)(1). | a qualified ABLE program, or und | er a qualified state tuition program. | |
| | ✓ No Ins | titution name and description. Se | eparately file the records of any interes | sts.11 U.S.C. § 521(c): | |
| | | | | | |
| 25. | Trusts. equitable | or future interests in property | (other than anything listed in line | e 1), and rights or powers | |
| | exercisable for y | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | Yes. Describe | | | | |
| 26. | | | s, and other intellectual property eeds from royalties and licensing agre | eements | |
| | No Yes. Describe | | | | |
| | | | | | |
| 27. | | ises, and other general intanging permits, exclusive licenses, coo | ibles perative association holdings, liquor | licenses, professional licenses | |
| | ✓ No Yes. Describe | | | | |
| | <u> </u> | | | | |
| | | | | | |
| Moi | ney or property | owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property | | | | portion you own? Do not deduct secured |
| | Tax refunds owed | | | | portion you own? Do not deduct secured |
| | Tax refunds owed ✓ No Yes. Give spec | to you | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed ✓ No Yes. Give spec about the you already | to you | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed No Yes. Give spec about the you alread and the filters. | cific information em, including whether idy filed the returns ax years | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed No Yes. Give spec about th you alrea and the form Family support Examples: Past du | cific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spectors about the you alreated and the first support Examples: Past due. ✓ No | cific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spectors about the you alreated and the first support Examples: Past due. ✓ No | bific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: Local: , divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spectors about the you alreated and the first support Examples: Past due. ✓ No | bific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed ✓ No Yes. Give spectors about the you alreated and the first support Examples: Past due. ✓ No | bific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give speciabout the you alreated and the first support Examples: Past due ✓ No Yes. Give speciabout the young alreated and the first support the first support the years of the years | cific information em, including whether idy filed the returns ax years | support, child support, maintenance | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spect about the you alreated and the factorial support Examples: Past du ✓ No ✓ Yes. Give spectorial support Examples: Unpaid | cific information em, including whether idy filed the returns ax years | ents, disability benefits, sick pay, vac | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed ✓ No Yes. Give spect about the you alreated and the factorial support Examples: Past du ✓ No Yes. Give spectorial support Examples: Other amounts support Examples: Unpaid | cific information em, including whether ady filed the returns ax years e or lump sum alimony, spousal cific information | ents, disability benefits, sick pay, vac | State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Oscar A | | Avila | Case number (if known) | |
|------|---|----------------------|------------------------------|--|--|
| | First Name Mi | ddle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insur | ance; health saving: | s account (HSA); credit, ho | meowner's, or renter's insurance | |
| | No No | Compan | y name: | Beneficiary: | Surrender or refund value: |
| | Yes. Name the insurance company of each policy and list its value | | yer - term life insurance | | \$0.00 |
| | | | | | <u> </u> |
| | | | | | |
| 32. | Any interest in property that is due y If you are the beneficiary of a living trus property because someone has died. | | | or are currently entitled to receive | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 33. | Claims against third parties, whethe Examples: Accidents, employment disp | | | demand for payment | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 34. | Other contingent and unliquidated of to set off claims | claims of every nat | ure, including countercia | aims of the debtor and rights | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 35. | Any financial assets you did not alre | adv list | | | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 36. | Add the dollar value of all of your en | | | | \$2175.00 |
| | for Part 4. Write that number here | | | | |
| | | | | | |
| Part | - | | | erest In. List any real estate in Par | t 1. |
| 37. | Do you own or have any legal or equ | itable interest in a | any business-related prop | • | Current value of the |
| | No. Go to Part 6. | | | | portion you own? |
| | Yes. Go to line 38. | | | | Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or commissions | s you already earn | ed | | |
| | ✓ No Yes. Describe | | | | |
| | L 163. Describe | | | | |
| 39. | Office equipment, furnishings, and s Examples: Business-related computers, | | , printers, copiers, fax mac | hines, rugs, telephones, desks, chairs, elec | tronic devices |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Oscar | A | Avila | Case number (if known) | |
|--------|--------------------------|-------------------------------------|------------------------------|-----------------------------------|--|
| 10 | First Name | Middle Name | Last Name | | |
| 40. | | equipment, supplies you use | in pusiness, and tools of y | our trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | - N | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 42. | Interests in partnersh | ips or joint ventures | | | |
| | ✓ No | | | | |
| | Yes. Give specific | Nai | me of entity: | % of ownership: | |
| | information about | | | <u> </u> | |
| | them | | | | |
| | | | | | - |
| | | <u> </u> | | | |
| 43. (| Customer lists, mailing | lists, or other compilations | 5 | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | nclude personally identifiable i | nformation (as defined in 11 | U.S.C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | ribe | | | |
| | L 1361 2363 | | | | |
| 44. | Any business-related | property you did not alread | y list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | <u> </u> |
| | information | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| 45. A | dd the dollar value of a | all of your entries from Part | 5, including any entries fo | r pages you have attached | |
| for Pa | art 5. Write that numbe | er here | | | |
| | Describe Any F | arm- and Commercial F | ishing-Related Propert | y You Own or Have an Interest In. | |
| Part | If you own or have an | interest in farmland, list it in Pa | urt 1. | y rou own or riave an interest in | |
| 46. | Do you own or have a | ny legal or equitable intere | st in any farm- or commer | cial fishing-related property? | |
| | - | , rogar or oquitable intere | | olar norming rotation property: | Current value of the |
| | No. Go to Part 7. | | | | portion you own? |
| | Yes. Go to line 47. | | | | Do not deduct secured claims or exemptions |
| 47 | Farm animals | | | | or exemptions |
| | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |

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| Debi | or 1 Oscar | A | Avila | Case number (if known) | |
|--------------|--------------------------------|------------------------------------|------------------------------|----------------------------------|--------------|
| | First Name | Middle Name | Last Name | | |
| 48. | Crops-either growing of | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | Tes. Describe | | | | |
| | | | | | |
| 49 | Farm and fishing equir | ment, implements, machinery, | fixtures, and tools of trade | 1 | |
| 10. | | mont, impromonto, macimiory, | incurred, and toole of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 51. | Any farm- and comme | cial fishing-related property yo | u did not already list | | |
| | No. | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | Г | |
| 52. A | dd the dollar value of al | l of your entries from Part 6, inc | luding any entries for pag | es you have attached | |
| for Pa | art 6. Write that number | here | | | |
| • | | | | L | |
| | | | | | |
| | | | | | |
| Part | Describe All Pro | perty You Own or Have an I | nterest in That You Did | l Not List Above | |
| 53 | | perty of any kind you did not alr | | | |
| 00. | | s, country club membership | oddy noti | | |
| | ✓ No | | | | |
| | | | | | |
| | Yes. Give specific information | | | | |
| | imomation | | | | - |
| | | | | | · |
| | | | | | |
| 54. A | dd the dollar value of al | l of your entries from Part 7. Wr | ite that number here | | • |
| | | , | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Dout | List the Totals of | Each Part of this Form | | | |
| Part | List the Totals of | Each Part of this Form | | | _ |
| 55 1 | Part 1: Total roal actato | , line 2 | | • | |
| JJ. 1 | ait i. iotaliealestate | , IIIIe 2 | | | |
| 56 - | part 2 total vehicles, lin | o E | | | |
| | • | | | _ | |
| 57.P | art 3: Total personal an | d household items, line 15 | \$1325.00 | <u></u> | |
| 58. P | art 4: Total financial as | sets, line 36 | \$2175.00 | | |
| | | | \$2175.00 | | |
| 59. | Part 5: Total business-re | elated property, line 45 | - | <u></u> | |
| 60. I | Part 6: Total farm- and f | ishing-related property, line 52 | | | |
| 64 . | Sout 7. Total athan a | autormat lintad line 54 | | _ | |
| б1. Г | Part 7: Total other prop | erty not listed, line 54 | - | <u></u> | |
| 62.1 | Total personal property. | Add lines 56 through 61 | \$3500.00 | | + \$3500.00 |
| | | | φουυ.υυ | — Copy personal property total ► | + \$3000.00 |
| | | | | | |
| | | | | | \$3500.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 6 | 2 | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Oscar | Α | Avila | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| art 1: Identify the Property You Clair | n as Exempt | | | | | | |
|---|--------------------------------------|---|------------------------------------|--|--|--|--|
| Which set of exemptions are you claim | i ng? Check one only, ev | ven if your spouse is filing with you. | | | | | |
| You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | | | |
| For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Copy the value from Schedule A/B | | | | | | |
| Brief | | | 735 ILCS 5/12-1001(b) | | | | |
| description: | \$300.00 | \$300.00 | | | | | |
| Used Furniture Line from | | 100% of fair market value, up to any | _ | | | | |
| Schedule A/B: 06 | | applicable statutory limit | | | | | |
| Brief | Ф700 00 | _ | 735 ILCS 5/12-1001(b) | | | | |
| description: Used Electronics - 2 | \$700.00 | \$700.00 | | | | | |
| TV's, 2 Game Systems, 1 Phone | | 100% of fair market value, up to any applicable statutory limit | _ | | | | |
| Line from Schedule A/B: 07 | | | | | | | |
| ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | | | |

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Debtor 1 Oscar Avila Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$300.00 description: **✓** \$300.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$25.00 description: **✓** \$25.00 Schnoodle 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$300.00 description: **✓** \$300.00 Checking account, 100% of fair market value, up to any **Huntington Bank** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$0.00 description: **✓** Savings account, 100% of fair market value, up to any **Huntington Bank** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1006 Brief \$975.00 description: **✓** \$975.00 401(k) or similar plan, w/ 100% of fair market value, up to any employer applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$900.00 description: **✓** \$900.00 Security deposit on 100% of fair market value, up to any rental unit, w/ lanlord applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(f) Brief \$0.00 description: **V** \$0 w/employer - term life

insurance

31

Line from Schedule A/B:

100% of fair market value, up to any

applicable statutory limit

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| | | | 9 | | | |
|--------------------------|-----------------------------------|--------------------------------|--|--|------------------------------|------------------------------------|
| Fill in this inf | ormation to identify your c | ase: | | | | |
| Debtor 1 | Oscar | Α | Avila | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case numbe (If known) | r | | | | | |
| Officia | Form 106D | | | J | | Check if this is an amended filing |
| Sched | ule D: Credit | tors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space i | | | e are filing together, both are equ nber the entries, and attach it to t | | | |
| 1. Do any | creditors have claims | secured by your proper | ty? | | | |
| ✓ No | . Check this box and sub | mit this form to the court v | with your other schedules. You hav | e nothing else to repo | ort on this form. | |
| Ye | s. Fill in all of the information | on below. | | | | |
| Part 1: Lis | st All Secured Claims | | | | | |
| for each | | editor has a particular claim, | red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the | Column B Value of collateral | Column C Unsecured portion |

this claim

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| Fill in | this inforr | nation to identify your c | ase: | | | |
|------------------------|---|--|--|--|--|---|
| Debte | or 1 | Oscar First Name | A Middle Name | Avila Last Name | | |
| Debte (Spous | or 2 se, if filing) | First Name | Middle Name | Last Name | | |
| Unite | d States B | ankruptcy Court for the: | Northern | District of Illinois (State) | _ | |
| Case (If know | number wn) | | | (1000) | | |
| Offi | cial Fo | orm 106E/F | | | | Check if this is an amended filing |
| Sc | hedu | ıle E/F: Cre | ditors Who | Have Unsec | ured Claims | 12/15 |
| other Form claim | party to a 106A/B) a s that are ntries in th | iny executory contracts and on Schedule G: Exe listed in Schedule D: C | s or unexpired leases that cutory Contracts and Und reditors Who Hold Claims | t could result in a claim. Al expired Leases (Official For s Secured by Property. If m | so list executory contracts or rm 106G). Do not include any ore space is needed, copy th | NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured ne Part you need, fill it out, number ite your name and case number (if |
| Part | 1: List A | All of Your PRIORIT | / Unsecured Claims | | | |
| 1. | | editors have priority un Go to Part 2. | secured claims against y | rou? | | |
| | listed, iden | tify what type of claim it | is. If a claim has both priori | ty and nonpriority amounts, I | ist that claim here and show be | rately for each claim. For each claim oth priority and nonpriority amounts. rity unsecured claims, fill out the |

Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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Avila Debtor 1 Oscar Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Chase \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 9001871 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 40290 Louisville Kentucky City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **V** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Unsecured Is the claim subject to offset? Yes 4.2 City of Chicago - Parking and red Light Tickets \$5,676.80 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60680 Chicago City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Tickets Is the claim subject to offset? **✓** No Yes CONVERGENT OUTSOURCING 4.3 \$835.00 Last 4 digits of account number 1837 Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 When was the debt incurred? 11/2013 Number As of the date you file, the claim is: Check all that apply. Contingent 77043 Texas Houston Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: **✓** No Other. Specify COMCAST Yes

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Avila Debtor 1 Oscar Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 **Diversified Consultants** \$400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10550 Deerwood Park Blvd Number As of the date you file, the claim is: Check all that apply. Suite 309 Contingent Unliquidated 32256 Jacksonville Florida City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collection Agent // Dish Network Is the claim subject to offset? **✓** No Yes FIFTH THIRD \$100.00 4.5 Last 4 digits of account number _ Nonpriority Creditor's Name 5050 Kingsley Dr When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Cincinnati Ohio 45227 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ NSF Is the claim subject to offset? **✓** No Yes 4.6 Peoples Gas \$1,400.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 E. Randolph n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Unsecured

✓ No Yes

Is the claim subject to offset?

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Avila Debtor 1 Oscar Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 PHOENIX RECOVERY GROUP \$22,274.00 Last 4 digits of account number 2064 Nonpriority Creditor's Name When was the debt incurred? 11/2012 2939 MOSSROCK STE 220 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SAN ANTONIO 78230 Texas City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Collection Agent // CREDITOR: 4453-59 W DIVERSEY- REALTY M Is the claim subject to offset? Other. Specify (12 M1 713487) **✓** No Yes T mobile Bankruptcy Team \$100.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 53410 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bellevue Washington 98015 Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Unsecured **V** Other. Specify ___ Is the claim subject to offset? **✓** No Yes Village of Skokie \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5127 Oakton Street n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60077 Skokie Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify _

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Debtor 1 Oscar Avila Case number (if known) First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Realty Mortgage Co On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check c/o: Kahn Sanford Ltd Line 4.7 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60601 Last 4 digits of account number 2064 City State Zip Code Goldman, Herbert On which entry in Part 1 or Part 2 did you list the original creditor? 5 Revere Dr, Ste 500 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Northbrook Illinois 60062 Last 4 digits of account number 2064 City State Zip Code Arnold Scott Harris On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 111 W. Jackson # 600 Line 4.2 Part 1: Creditors with Priority Unsecured Claims one): Number Street

Last 4 digits of account number

Chicago

City

Illinois

State

60604

Zip Code

Part 2: Creditors with Nonpriority Unsecured

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Debtor 1 Oscar A Avila Case number (if known)

| FIRST INS | me Middle Name Last Name | | | |
|--------------------------|---|---------|----------------------|---------|
| Part 4: Add t | he Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is mounts for each type of unsecured claim. | s for s | tatistical reporting | purpose |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| irom Part I | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | de. Total. Add lilles da tillough du. | oe. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$100.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write | 6i. | \$30,885.80 | |
| | that amount here. | | ¢20.005.00 | |
| | 6i. Total. Add lines 6f through 6i. | 6i. | \$30,985.80 | |

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| Fill in this information to identify your case: | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Oscar | Α | Avila | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Pers | son or compan | y with whom you have | the contract or lease | State what the contract or lease is for |
|------|--|----------------------|-----------------------|---|
| Na | ucaro, Lou ame 470 N 1st St, # 6 | | _ | Residential Lease, Debtor is Lessee, Year to Year - Residential Lease |
| Nu | umber | Street | | |
| Me | elrose Park | Illinois | 60160 | |
| Cit | ity | State | Zip Code | |

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| Official Form 106H | | | | | , | |
|--|---|---|---|--|------------------------------------|--|
| First Name | Fill in this infor | mation to identify your c | ase: | | | |
| Debtor 2 Spows, if filling First Name | Debtor 1 | Oscar | Α | Avila | | |
| United States Bankruptcy Court for the: Northem District of Illinois (State) Case number (Illinois) Case number (Illinois) Check if this is a mended filing a content of the country of | | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: Northern District of Illinois (State) | | | Add I II Al | | | |
| Case number (Itknown) Check if this is a amended filing a mended filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.) No Yes | (Spouse, Ir IIIIIg) | First Name | Middle Name | Last Name | | |
| Case number ((Ikrown)) Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code | United States E | Bankruptcy Court for the: | Northern | | | |
| Official Form 106H Schedule H: Your Codebtors 12/1 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louislana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes. In which community state or territory did you live? Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code | Case number | | | (State) | | |
| Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No See See See See See See See See See Se | | | | | | |
| Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entiries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No | | | | | | Check if this is ar |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Yes No Yes Yes No Yes No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code Z | Ott: ~: ~! | Farms 10CLL | | | | amended ming |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Ves | Oniciai | FORM TUCH | | | | |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) Ves | Schedul | e H. Your Cod | lehtors | | | 12/15 |
| No Yes. In which community state or territory did you live? Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code | 1. Do you ha No Yes Within the Idaho, Loc No. | e last 8 years, have you uisiana, Nevada, New Mex Go to line 3. | lived in a community pro ico, Puerto Rico, Texas, W | operty state or territor Jashington, and Wiscon | y? (<i>Commur</i> sin.) | |
| Yes. In which community state or territory did you live? Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code | <u> </u> | • | er spouse, or legal equiva | alent live with you at the | e time? | |
| Name of your spouse, former spouse, or legal equivalent Number Street City State Zip Code | | | | | | |
| Number Street City State Zip Code | ш | Yes. In which communit | y state or territory did yo | u live? | Fill in t | the name and current address of that person. |
| City State Zip Code | | Name of your spouse, f | ormer spouse, or legal equ | uivalent | | |
| | | Number Street | | | | |
| | | City | State | Zip (| Code | |
| again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), | | • | - | • | | · · · · · · · · · · · · · · · · · · · |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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| Fill in this information | on to identify | your case: | | | | |
|--|--|--|-----------------------|-------------------|-------------------|---|
| Debtor 1 Oscar | | A | Avila | | _ | |
| First N | lame | Middle Name | Last Na | ame | Che | eck if this is: |
| Debtor 2 (Spouse, if filing) First N | lame | Middle Name | Last Na | ame | – I п | An amended filing |
| | | | | | | A supplement showing post-petition chapter 1 |
| United States Bankrup the: | picy Court for | Northern | District of Illing (S | tate) | | expenses as of the following date: |
| Case number | | | \ - | | _ , | |
| (lf known) | | | | | | MM / DD / YYYY |
| Official Forn | n 106l | | | | | |
| Schedule I: | Your Inc | come | | | | 12/1 |
| information about yospouse. If more spanumber (if known). | our spouse. It ce is needed, | f you are separated and , attach a separate shee , question. | d your spous | se is not filing | with you, do | r spouse is living with you, include not include information about your ional pages, write your name and case |
| Fill in your emplo | yment | | Debtor 1 | | | Debtor 2 |
| information. | • | Foots and date | | | | |
| If you have more th | • | Employment status | | | | Employed |
| attach a separate painformation about | • | | Not En | nployed | | Not Employed |
| employers. | | Occupation | RTR Opera | ator | | |
| Include part time, s self-employed worl | | Employer's address 4123 W Pe | | Plating Purchase | Cor | <u>.</u> . |
| Occupation may in | clude student | | | | | |
| or homemaker, if it | | | Number Str | eet | | Number Street |
| | | | | | | |
| | | | Chicago City | Illinois State | 60646 Zip Code | City State Zip Code |
| | | | • | Otate | Zip Oode | State Zip Code |
| | | How long employed there? | 2 years | | | |
| | | | | | | |
| Part 2: Give Deta | ails About M | Ionthly Income | | | | |
| | | | | | | |
| spouse unless you ar | ncome as of the separated. | | - | | - | write \$0 in the space. Include your non-filing |
| spouse unless you ar | ncome as of the separated. | e more than one employer, | - | | - | or that person on the lines below. If you need |
| spouse unless you ar If you or your non-filir | ncome as of the separated. | e more than one employer, | - | information for | - | |
| spouse unless you ar If you or your non-filir more space, attach a 2. List monthly gro | ncome as of the separated. ng spouse have a separate sheet one of the separate sheet sheet of the separate sheet sheet sheet of the separate sheet shee | e more than one employer, | combine the i | information for | all employers fo | or that person on the lines below. If you need |
| spouse unless you ar If you or your non-filir more space, attach a 2. List monthly gro deductions.) If no | ncome as of the re separated. ng spouse have a separate sheet a separate sheet as wages, salate of paid monthly, | e more than one employer, et to this form. Try, and commissions (befor calculate what the monthly was a second to the control of the control | combine the i | information for | all employers fo | or that person on the lines below. If you need |

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| Debtor 1Oscar | | rila | Case number | (if | | |
|--|--|--------------------|-----------------------|-----------------------------------|-------------------------|--|
| First Name | Middle Name La | st Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Copy line 4 here | | → 4. | \$2,174.47 | | | |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Soc | cial Security deductions | 5a. | \$435.72 | | | |
| 5b. Mandatory contributio | ns for retirement plans | 5b. | \$0.00 | | | |
| 5c. Voluntary contributions | s for retirement plans | 5c. | \$0.00 | | | |
| 5d. Required repayments of | of retirement fund loans | 5d. | \$0.00 | | | |
| 5e. Insurance | | 5e. | \$0.00 | | | |
| 5f. Domestic support oblig | ations | 5f. | \$0.00 | | | |
| 5g. Union dues | | 5g. | \$0.00 | | | |
| 5h. Other deductions. Spec | cify: Healthcare | 5h. + | \$103.65 + | | | |
| · | s. Add lines 5a + 5b + 5c + 5d + 5e +5f | + 5g 6. | \$539.37 | | | |
| 7. Calculate total monthly tak | ke-home pay. Subtract line 6 from line 4 | 1. 7. | \$1,635.10 | | | |
| 8. List all other income regula | arly received: | | | | | |
| business, profession, o | | | | | | |
| | ach property and business showing and necessary business expenses, and ome. | 8a. | \$0.00 | | | |
| 8b. Interest and dividends | | 8b. | \$0.00 | | | |
| 8c. Family support paymer dependent regularly re | nts that you, a non-filing spouse, or a ceive | | | | | |
| Include alimony, spousa divorce settlement, and p | I support, child support, maintenance, property settlement. | 8c. | \$0.00 | | | |
| 8d. Unemployment compe | nsation | 8d. | \$0.00 | | | |
| 8e. Social Security | | 8e. | \$0.00 | | | |
| Include cash assistance a cash assistance that you | stance that you regularly receive and the value (if known) of any non- receive, such as food stamps (benefits Nutrition Assistance Program) or | 8f. | \$0.00 | | | |
| 8g. Pension or retirement | income | 8g. | \$0.00 | | | |
| 8h. Other monthly income | | 8h. + | \$665.00 + | | | |
| | nes 8a + 8b + 8c + 8d + 8e + 8f +8g + 8 | 8h. 9. | \$665.00 | | | |
| 10. Calculate monthly income Add the entries in line 10 for | s. Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing spo | 10. ouse | \$2,300.10 + | = | \$2,300.10 | |
| Include contributions from a friends or relatives. | ntributions to the expenses that you I n unmarried partner, members of your h s already included in lines 2-10 or amour | ousehold, your c | ependents, your roomn | | | |
| Specify: | | | | 1 | 1. + \$0.00 | |
| | 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | | |
| 13. Do you expect an increase No. Yes. Explain: | e or decrease within the year after yo | ou file this form? | | | Combined monthly income | |
| | | | | | | |

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| | | Docu | ment Page 33 of 71 | | | |
|-----------------------------------|--|---|--|-------------------------|------------------------|---------------------|
| Fill in this infor | mation to identify you | r case: | | | | |
| Debtor 1 | Oscar | А | Avila | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | ıg | |
| United States E | Bankruptcy Court for th | | District of Illinois | | | petition chapter 13 |
| Case number | | | (State) | expenses as of t | ne following (| iale. |
| (If known) | | | _ | MM / DD / YYYY | | |
| Official | Form 106J | | | | | |
| Schedul | e J: Your Ex | penses | | | | 12/15 |
| information. If | | | re filing together, both are equall form. On the top of any additiona | | | |
| <u>`</u> | cribe Your Housel | nold | | | | |
| 1. Is this a joi | | 1014 | | | | |
| | o to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a | separate household? | | | | |
| г | No | | | | | |
| | Yes. Debtor 2 mus | t file Official Forms 106J-2, <i>Expen</i> | ses for Separate Household of Debt | or 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age 7 years | Does depe with you? | endent live |
| | | | | | ✓ Yes. | |
| | | | Child | 9 years | No. | |
| | | | | | ✓ Yes. | |
| | penses include f people other | No | | | | |
| than yourself an dependents | _ | Yes | | | | |
| Part 2: Esti | mate Your Ongoin | g Monthly Expenses | | | | |
| | of a date after the ba | | ou are using this form as a suppliplemental Schedule J, check the | | | |
| | • | n-cash government assistance i d it on Schedule I: Your Income | - | | | Your expenses |
| | or home ownership or the ground or lot. 4. | · · | clude first mortgage payments and | | 4. | \$775.00 |
| If not incl | uded in line 4: | | | | | |
| | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, or r | enter's insurance | | | 4b. | \$0.00 |

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Oscar A Avila Case number (if known)
First Name Middle Name Last Name

| FIISLINAITIE | Middle Name Last Name | | |
|---|--|------------|---------------|
| | | | Your expenses |
| 5. Additional mortgage payme | ents for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | as | 6a. | \$80.00 |
| 6b. Water, sewer, garbage co | llection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, In | ternet, satellite, and cable services | 6c. | \$230.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | | 7. | \$495.00 |
| 8. Childcare and children's ed | lucation costs | 8. | \$240.00 |
| 9. Clothing, laundry, and dry o | leaning | 9. | \$50.00 |
| 10. Personal care products ar | nd services | 10. | \$30.00 |
| 11. Medical and dental expen | ses | 11. | \$25.00 |
| 12. Transportation. Include gas Do not include car payment | | 12. | \$200.00 |
| 13. Entertainment, clubs, recr | reation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dec | ducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify | <u>/:</u> | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease paym | ents: | 10 | |
| 17a. Car payments for Vehicl | e 1 | 17a | \$0.00 |
| 17b. Car payments for Vehicl | e 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| | , maintenance, and support that you did not report as deducted from | | \$0.00 |
| | ule I, Your Income (Official Form 106I). | 18. | |
| , , , | to support others who do not live with you. | 40 | |
| Specify: | and the live of the Control of the C | 19. | \$0.00 |
| 20a. Mortgages on other pro | ses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 20a | \$0.00 |
| 20b. Real estate taxes. | r - 2 | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | 20b 20c | \$0.00 |
| 20d. Maintenance, repair, and | | 20d | \$0.00 |
| 20e. Homeowner's association | | | |
| | | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 | Oscar | Α | Avila | Case number (if known) | | |
|--|-------------------------|---|-------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21. Othe | r. Specify: | | | | 21 | \$0.00 |
| 22. Calc | ulate your monthly ex | kpenses. | | | | \$2,125.00 |
| 22a. | Add lines 4 through 21. | | \$0.00 | | | |
| 22b. | Copy line 22 (monthly | | \$2,125.00 | | | |
| 22c. | Add line 22a and 22b. 7 | The result is your monthly exp | enses. | | 22. | |
| 23.Calc | ulate your monthly ne | t income. | | | | |
| 23a. | Copy line 12 (your com | bined monthly income) from | Schedule I. | | 23a | \$2,300.10 |
| 23b. | Copy your monthly exp | penses from line 22 above. | | | 23b | \$2,125.00 |
| | | expenses from your monthly i | ncome. | | | \$175.10 |
| The result is your monthly net income. | | | | | 23c | |
| mor | | t to finish paying for your car lase or decrease because of a r | | | | |
| | | | | | | |
| | | | | | | |

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| Debtor 2 (Spouse, if filling) First Name Middle Name Last N United States Bankruptcy Court for the: Northern District of II | Debtor 1 | Oscar | Α | Avila |
|---|---|---------------------------|-------------|----------------------|
| (Spouse, if filing) First Name Middle Name Last N United States Bankruptcy Court for the: Northern District of II | | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: Northern District of II | Debtor 2 | | | |
| (5 | (Spouse, if filing) | First Name | Middle Name | Last Name |
| • | United States Bankruptcy Court for the: | | Northern | District of Illinois |
| Case number | Officed States i | Sankrupicy Court for the. | Northern | (State) |
| (If known) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Oscar Avila | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 11/9/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Till in this infor | | | | | | |
|--------------------------------|---|--------------------------------|---|---|----------|---|
| | rmation to identify you | r case: | | | | |
| Debtor 1 | Oscar | А | Avila | | | |
| Debtor 2 | First Name | Middle | e Name Last Nam | е | | |
| Spouse, if filing) | First Name | Middle | e Name Last Nam | e e | | |
| Jnited States I | Bankruptcy Court for th | e: Northern | District of Illino | is | | |
| Case number | | | (Stat | e) | | |
| f known) | | | | | | Check if this |
| Official | Form 107 | | | | | amended filin |
| Stateme | nt of Financ | ial Δffaire | for Individuals | Filing for Bankr | untcy | 04 |
| formation. I umber (if kn | If more space is nee lown). Answer every | eded, attach a se question. | | together, both are equall . On the top of any addit | | |
| | your current marital | | Sand Where You Liveu | <u> Deloi e</u> | | |
| ☐ Ma | ırried | | | | | |
| ☑ Not | t married | | | | | |
| . During t | the last 3 years have | you lived anywhe | re other than where you liv | | | |
| | | | | | | |
| | - | you lived allywine | re other than where you in | ve now? | | |
| □ No | | | - | | | |
| □ No | | | st 3 years. Do not include v | | | |
| ☐ No ✓ Yes | | | - | | | Dates Debtor 2 lived there |
| ☐ No ✓ Yes | s. List all of the places | | st 3 years. Do not include v | where you live now. | | |
| No Yes Del | s. List all of the places | | st 3 years. Do not include to Dates Debtor 1 lived there | where you live now. Debtor 2: | | there Same as Debtor 1 |
| No Yes Del | s. List all of the places | | Dates Debtor 1 lived there From 09/2013 | where you live now. Debtor 2: | | there Same as Debtor 1 From |
| No Yes Del | s. List all of the places btor 1: 39 W Belden, Apt 1 mber Street | you lived in the la | st 3 years. Do not include to Dates Debtor 1 lived there | where you live now. Debtor 2: Same as Debtor 1 | | there Same as Debtor 1 |
| No Yes Del | s. List all of the places btor 1: 39 W Belden, Apt 1 mber Street icago Illinois | | Dates Debtor 1 lived there From 09/2013 | where you live now. Debtor 2: Same as Debtor 1 | Zip Code | there Same as Debtor 1 From |
| No Yes Del 263 Nur Chi | s. List all of the places btor 1: 39 W Belden, Apt 1 mber Street icago Illinois | you lived in the la | Dates Debtor 1 lived there From 09/2013 | where you live now. Debtor 2: Same as Debtor 1 Number Street | Zip Code | there Same as Debtor 1 From |
| No Yes Del 263 Nui Chi City | btor 1: 39 W Belden, Apt 1 mber Street icago Illinois y State | you lived in the la | Dates Debtor 1 lived there From 09/2013 To 09/2017 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| No Yes Del 263 Nur Chi City | s. List all of the places btor 1: 39 W Belden, Apt 1 mber Street icago Illinois | you lived in the la | Dates Debtor 1 lived there From 09/2013 To 09/2017 From | where you live now. Debtor 2: Same as Debtor 1 Number Street City State | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |
| No Yes Del 263 Nu Chi City | btor 1: 39 W Belden, Apt 1 mber Street icago Illinois y State | you lived in the la | Dates Debtor 1 lived there From 09/2013 To 09/2017 | where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 |
| No Yes Del 263 Nui Chi City | btor 1: 39 W Belden, Apt 1 mber Street icago Illinois y State | you lived in the la | Dates Debtor 1 lived there From 09/2013 To 09/2017 From | where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1 | Zip Code | there Same as Debtor 1 From To Same as Debtor 1 From From |

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Avila

| Debte | or 1 | Oscar A | Avila | | umber (if known) | | | | | |
|---------------|---|---|---|---|--|--|--|--|--|--|
| | | First Name Middle | e Name Last Nam | е | | | | | | |
| Part : | 2: | Explain the Sources of Your Inc | come | | | | | | | |
| ı | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. | | | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | |
| | | om January 1 of current year until e date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$24900.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | | or last calendar year: anuary 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$27000.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| | | or the calendar year before that: anuary 1 to December 31, 2015) YYYY | Wages, commissions, bonuses, tips Operating a business | \$18000.00 | Wages, commissions, bonuses, tips Operating a business | | | | | |
| lı p fi | nclu lubli ling .ist e | you receive any other income during de income regardless of whether that in its benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No Yes. Fill in the details. | ncome is taxable. Examples o come; interest; dividends; mo you received together, list it o | f other income are alimony; oney collected from lawsuits; only once under Debtor 1. | royalties; and gambling and lot | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | | | | |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | | | | | | | | |
| | | or last calendar year: anuary 1 to December 31, 2016) YYYY | | | | | | | | |
| | | or the calendar year before that: anuary 1 to December 31, 2015 YYYYY | | | | | | | | |
| | | | | | | | | | | |

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Avila Debtor 1 Oscar __ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor ' | 1 Oscar | | Α | Avil | a | Case number | (if known) |
|--------------------|---|---|--|--|--|---|--|
| | First Name | | Middle Name | Last | Name | | |
| Insi cor age | iders include your re porations of which | elatives; an you are an or a busine | y general partners officer, director, p ess you operate as | ; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? You are a general partner; Is securities; and any managing The domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all paym | nents to a | n insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City S | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| insi | ider? nider? nide payments on de No No Yes. List all paym | ebts guara | anteed or cosigned | d by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City S | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Oscar Avila Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | | Oscar | Α | Avila | Case number (if know | n) | |
|------|---------------------|--|------------------------|--|------------------------------|--------------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | | |
| 11. | | thin 90 days before you fil counts or refuse to make | | d any creditor, including a b ou owed a debt? | ank or financial institution | ı, set off any amou | ints from your |
| | V | No | | | | | |
| | ¥ | | | | | | |
| | Ш | Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | e creditor took | Date action was taken | Amount |
| | | | | | | | |
| | | Creditor's Name | | _ | | | |
| | | Number Street | | _ | | | |
| | | | | Last 4 digits of account | aum haw VVVV | | |
| | | | | _ Last 4 digits of account i | number: XXXX- | | |
| | | | | | | | |
| | | City State | Zip Code | _ | | | |
| | | • | · | | | | |
| 12. | | hin 1 year before you file pointed receiver, a custoo | | any of your property in the al? | possession of an assignee | for the benefit of o | creditors, a court- |
| | | No | | | | | |
| | $ldsymbol{\square}$ | No | | | | | |
| | | Yes | | | | | |
| | | | | | | | |
| Part | 5: | List Certain Gifts and | Contributions | | | | |
| 13. | Wi | thin 2 years before you fi | led for bankruptcy, di | d you give any gifts with a to | otal value of more than \$60 | 00 per person? | |
| | | No No | | | | | |
| | ✓ | 4 | | | | | |
| | | Yes. Fill in the details fo | r each gift. | | | | |
| | | Gifts with a total value per person | of more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Ga | up the Gift | _ | | | |
| | | reison to whom fou da | ve the Gift | | | | |
| | | | | - | | | |
| | | N | | _ | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | - | | | |
| | | | · | | | | |
| | | Person's relationship to y | ou | | | | |
| | | | | | | _ | |
| | | | | | | | |
| | | Person to Whom You Ga | ve the Gift | _ | | | |
| | | | | _ | | | |
| | | | | | | | |
| | | Number Street | | - | | | |
| | | | | | | | |
| | | City State | Zip Code | _ | | | |
| | | Person's relationship to ye | ou | | | | |
| | | | | | | | |

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| Debt | | Oscar | A | Avila | Case number (if know | vn) | |
|------|----------|---|--------------------------|--------------------------------------|--|---|------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you filed | l for bankruptcy, did | you give any gifts or contri | butions with a total value | of more than \$600 | to any charity? |
| | V | No | | | | | |
| | H | Yes. Fill in the details for e | ach gift or contribution | on. | | | |
| | ш | Gifts or contributions to d | | Describe what you cor | tributed | Date you | Value |
| | | that total more than \$600 | | Describe what you con | ittibuteu | contributed | value |
| | | | | | | | |
| | | Charity's Name | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | • | _,, | | | _ | |
| Part | 6: | List Certain Losses | | | | | |
| | | | | | | | |
| 15. | | hin 1 year before you filed t nbling? | for bankruptcy or sin | ce you filed for bankruptcy | , did you lose anything bed | cause of theft, fire, | other disaster, or |
| | _ | | | | | | |
| | 널 | No | | | | | |
| | Ш | Yes. Fill in the details. | | | | | |
| | | Describe the property you how the loss occurred | ı lost and | | e coverage for the loss insurance has paid. List | Date of your loss | Value of property lost |
| | | now the loss occurred | | | s on line 33 of <i>Schedule</i> | 1055 | 1031 |
| | | | | A/B: Property. | | | |
| | | | | | | | |
| Dort | 7. | List Certain Payments | or Transfers | | | | |
| | | ut seeking bankruptcy or pude any attorneys, bankruptch | | | or services required in your b | ankruptcy. | |
| | ⊻ | Yes. Fill in the details. | | | | | |
| | | | | Description and value of transferred | of any property | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | Attorney's Fee - 350.00 | | 2/10/2017 | \$350.00 |
| | | Person Who Was Paid | | 7 ktomoy 6 1 66 666.66 | | | ******* |
| | | 20 S. Clark Street | | | | | |
| | | Number Street | | | | | |
| | | 28th Floor | | | | | |
| | | Chicago Illinois | 60603 | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payn | nent, if Not You | | | | |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | Cit. | 7:- 0 - 1 - | | | | |
| | | City State | Zip Code | | | | |
| | | Email or website address | | | | | |
| | | Person Who Made the Payn | nent, if Not You | | | | |

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| Debto | r 1 | Oscar | Α | Avila | Case | number <i>(if known)</i> | | | |
|--------|-------------------|--|--|--|--------------|--------------------------------------|--|---------|------------------------------|
| | | First Name | Middle Name | Last Name | | | | | |
| ı | elp | hin 1 year before you filed to you deal with your credit not include any payment or to | ors or to make paym | | our behalf | pay or transfer | any property to | anyone | who promised to |
| | <u> </u> | No Yes. Fill in the details. | | | | | | | |
| • | _ | | | Description and value of a transferred | ny propert | У | Date payment or transfer was made | Amo | unt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18. \ | Vitl | • | | you sell, trade, or otherwise to | ransfer anv | property to an | vone. other than | propei | tv transferred in |
| t I | he nclu | ordinary course of your bu | siness or financial at nd transfers made as s | ffairs? security (such as the granting of | _ | | | | |
| | ✓ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of p transferred | roperty | Describe any payments re in exchange | / property or ceived or debts | oaid | Date transfer was made |
| | | Person Who Received Trans | sfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| | | Person Who Received Trans | sfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | | | |
| ı | en | hin 10 years before you file eficiary? ese are often called asset-proi | | d you transfer any property to | a self-settl | ed trust or sim | ilar device of wh | ich you | are a |
| | <u> </u> | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of | the prope | rty transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

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Avila Debtor 1 Oscar Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Avila Debtor 1 Oscar _ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Oscar | | Α | | vila | Cas | e number (ii | fknown) | | |
|------|----------|---------------------|-----------------|---------------------|----------------|-----------------|----------------------|---------------|----------------|-------------------|-----------------|
| | | First Name | | Middle Name | La | ast Name | | | | | |
| 26. | ⊔مر | e you been a part | v in anv judi | cial or administ | rativo proco | odina undor | any anyiranmar | stal law? In | oludo sottlor | monte and ord | lore |
| 20. | пач | e you been a part | y iii aliy juul | cial of autilities | rative proce | ealing under | any environmen | ilai iaw: iii | iciuue settiei | nents and ord | iers. |
| | V | No | | | | | | | | | |
| | Ħ | Yes. Fill in the de | tails. | | | | | | | | |
| | ш | | | | Court or ag | ionov. | | Moturo | of the case | | Status of the |
| | | | | | Court or ag | ency | | nature | or the case | | case |
| | | Case title | | | | | | | | | |
| | | | | | | | | | | | Pending |
| | | | | | Court Name | J | | | | | |
| | | | | | NumberStre | oot | | | | | On appeal |
| | | Case number | | | Numberone | eı | | | | | Concluded |
| | | | | | City | State | Zip Code | | | | Concluded |
| | | | | | City | State | Zip Code | | | | |
| Part | 111: | Give Details A | bout Your I | Business or C | onnections | s to Anv Bu | siness | | | | |
| | | 00 2 0 00 7 0 | | | | , to , a.y _ to | | | | | |
| 27. | Witl | hin 4 years before | vou filed for | r bankruptcy, di | d vou own a | business or | have any of the | following c | onnections t | o any busines | s? |
| | | , | , | | . , | | | | | - u., _ u | • |
| | | A sole propr | ietor or self- | employed in a tr | ade, profes | sion, or other | r activity, either f | ull-time or p | oart-time | | |
| | | A member of | f a limited lia | bility company (| TTC) or limite | ed liability pa | artnership (LLP) | | | | |
| | | | | | | sa nasmiy pe | aranoromp (LLI) | | | | |
| | | A partner in | | • | | | | | | | |
| | | An officer, di | irector, or ma | anaging executi | ve of a corp | oration | | | | | |
| | | An owner of | at least 5% | of the voting or | equity securi | ities of a corp | poration | | | | |
| | | _ | | | | | | | | | |
| | ✓ | No. None of the | above applie | es. Go to Part 12 | 2. | | | | | | |
| | П | Yes. Check all th | at apply abo | ove and fill in the | e details belo | w for each t | ousiness. | | | | |
| | | | | | | | ure of the busine | ce | Employer I | dentification | number Do not |
| | | | | | Desc | inde the hatt | are or the busine | 33 | | | number or ITIN. |
| | | | | | | | | | | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | 240000 . 140 | | | | | | | | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | | | | Name | e of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | _ | | | | F | т- | |
| | | Oity | State | Zip Oode | | | | | From | 10 | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the natu | ure of the busine | ess | | | number Do not |
| | | | | | | | | | include So | cial Security r | number or ITIN. |
| | | | | | | | | | EIN: | | |
| | | Business Name | | | | | | | | | |
| | | N | | | | | | | Detect | in a constant and | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Desc | ribe the nati | ure of the busine | ess | Employer I | dentification | number Do not |
| | | | | | D C30 | o the natt | or the busine | | | | number or ITIN. |
| | | | | | | | | | | , | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | | | | | | | | | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | | | | Name | e of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | _ | | | | From- | т- | |
| | | Oity | Gidie | Zip Ooue | | | | | LI0III | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Debt | tor 1 Oscar | Α | Avila | Case number (if known) |
|------|---|--------------------------------|---------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | creditors, or other pa | | rou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill in the det | ails below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | <u> </u> | |
| | City | State Zip Code | _ | |
| Part | 12: Sign Below | | | |
| t | true and correct. I unde a bankruptcy case can | erstand that making a false st | atement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | x /s/ | Oscar Avila | | × |
| | Signati | ure of Debtor 1 | | Signature of Debtor 2 |
| | Date 1 | 11/9/2017 | | Date |
| | Did you attach addition | al pages to Your Statement o | f Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| [| ✓ No | | | |
| | Yes | | | |
| | Did you pay or agree to | pay someone who is not an a | ttorney to help you fill out b | ankruptcy forms? |
| [| ✓ No | | | |
| | Yes. Name of persor | 1 | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Norti | nern District of IIII | nois | |
|--------------|--|--------------------|---------------------------|--------------------------|---|
| In re | Oscar A Avila | | | Case No. | |
| | Debtor | | _ | | (If known) |
| | | | | Chapter | Chapter 13 |
| DI | SCLOSURE OF | COMPEN | ISATION OF | ATTORNEY | FOR DEBTOR |
| compen | sation paid to me within one | year before the | filing of the petition in | bankruptcy, or agreed | abovenamed debtor(s) and that d to be paid to me, for services the bankruptcy case is as follows: |
| For lega | I services, I have agreed to a | ccept | | | \$4,000.00 |
| Prior to | the filing of this statement I | have received | | | \$350.00 |
| Balance | Due | | | | \$3,650.00 |
| 2. The sou | rce of the compensation paid | d to me was: | | | |
| I | ✓ Debtor | Ot | ther (specify) | | |
| 3. The sou | rce of the compensation paid | d to me is: | | | |
| | ✓ Debtor | Ot | ther (specify) | | |
| | ve not agreed to share the ab mbers and associates of my l | | compensation with any | other person unless | they are |
| └ mer | ve agreed to share the above mbers or associates of my law people sharing in the compe | w firm. A copy of | f the agreement, togetl | | |
| 5. In return | for the above-disclosed fee | , I have agreed to | o render legal service f | or all aspects of the ba | ankruptcy case, including: |
| | Analysis of the debtor's finar pankruptcy; | ncial situation, a | nd rendering advice to | the debtor in determine | ning whether to file a petition in |
| b. I | Preparation and filing of any | petition, schedu | ules, statements of affa | irs and plan which ma | ay be required; |
| c. I | Representation of the debtor | at the meeting of | of creditors and confir | mation hearing, and ar | ny adjourned hearings thereof; |
| d. I | Representation of the debtor | in adversary pro | oceedings and other co | ontested bankruptcy n | natters; |
| 6. By agree | ement with the debtor(s), the | above-disclose | d fee does not include | the following services | S: |
| | | | | | |
| | | | | | |
| | | | CERTIFICATION | | |
| | at the foregoing is a comple iis bankruptcy proceedings. | te statement of a | any agreement or arran | gement for payment t | o me for representation of the |
| | 11/9/2017 | | | /s/ Elizabeth Placek | |
| | Date | | | Signature of Attorney | |
| | | | | Semrad Law Firm | |
| | | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$414.00
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$104.00 for expenses, leaving a balance due of \$4,064.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 11/8/2017 | |
|-----------------|------------------------|
| Signed: | |
| /s/ Oscar Avila | |
| Oscar a aux | /s/ Elizabeth Placek |
| Debtor(s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$414.00
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$104.00 for expenses, leaving a balance due of \$4,064.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 11/9/201 | 7 | <u>-</u> | |
|-----------------|---|----------|------------------------|
| Signed: | | | |
| /s/ Oscar Avila | | _ | |
| | | _ | /s/ Elizabeth Placek |
| Debtor(s) | | | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

 You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Avila, Oscar A Jr | Case No | |
|-----------------|-------------------|---|-------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIF | CATION OF CREDITOR MAT | RIX |
| Ti knowledge | | ify that the attached list of creditors is tr | ue and correct to the best of their |
| Date: | 11/9/2017 | /s/ Avila, Oscar A Avila, Oscar A Jr Signature of Deb | |

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PHOENIX RECOVERY GROUP 2939 MOSSROCK STE 220 SAN ANTONIO, TX, 78230

Realty Mortgage Co c/o: Kahn Sanford Ltd 180 N Lasalle #2025 Chicago, IL, 60601

Goldman, Herbert 5 Revere Dr, Ste 500 Northbrook, IL, 60062

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

FIFTH THIRD 5050 Kingsley Dr Cincinnati, OH, 45227

T mobile Bankruptcy Team 600 Beacon Pkwy W ste 300 c/o Amsher Collections Services Birmingham, AL, 35209

Chase PO Box 15821 Cardmember services Wilmington, DE, 19850

Village of Skokie 5127 Oakton Street Skokie, IL, 60077 Case 17-33577 Doc 1 Filed 11/09/17 Entered 11/09/17 09:17:52 Desc Main Document Page 66 of 71

Diversified Consultants 10550 Deerwood Park Blvd Suite 309 Jacksonville, FL, 32256

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| Debtor 1 Oscar First Name | A Avila Middle Name Last N | Case number | (ff known) |
|---|---|--|--|
| | estions for Reporting Purposes | ame | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily cor "incurred by an individual primarily No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus | narily for a personal, family, or h siness debts? <i>Business debts</i> a strnent or through the operation | re debts that you incurred to obtain of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that funds No. | | ipt property is excluded and administrative secured creditors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| ¹⁹ . How much do you estimate your assets to be worth? | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | n \$10,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? Part R. Sign Below | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | turned. |
| | I have examined this petition, and I | declare under penalty of periury | that the information provided is true and |
| For you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | |
| | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 1% U.S.C. §§ 152, 1341, 1519, and 3571. | | |
| | X / Oscar Avila | × | |
| | Signature of Debtor 1 | Signate | ure of Debtor 2 |
| : | Executed on 11/8/2017 MM / DD / YY | | rted onMM / DD / YYYY |

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| Filorathis infe | rnation to identify your case: | | |
|---------------------|------------------------------------|----------------------|------|
| Debtor 1 | Oscar A | \ Avila | |
| Debtor 2 | First Name N | Aiddle Name Last Na | me |
| (Spouse, if filing) | First Name M | /liddle Name Last Na | me . |
| United States I | Bankruptcy Court for the: Northern | District of Illin | ois |
| Case number | | (St | ate) |
| (If known) | | | |

Official Form 106Dec

Check if this is an amended filing

12/15

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part is Sign Below | |
|--|---|
| Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| ☑ No | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| 🗶 //s/ Oscar-Avila | × |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 11/8/2017 MM/DD/YYYY | Date MM/DD/YYYY |

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| Debtor 1 Oscar First Name | A Middle Name | Avila Last Name | Case number (if known) |
|---|--|---------------------------------|---|
| 28. Within 2 years before creditors, or other | ore you filed for bankruptcy, did yo parties. | ou give a financial statement | to anyone about your business? Include all financial institutions, |
| ☑ No ☐ Yes. Fill in the | datalla hakau | | |
| LJ restriction | retails Delow. | Date (ssued | |
| Name | | MM/DD/YYYY | |
| Number Stree | . <i>te</i> | | |
| City | State Zip Code | _ | |
| Panting Sign Below | | | |
| true and correct. I u a bankruptcy case c | nderstand that making a false sta | tement, concealing property, | s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| / | nature of Debtor 1 | | Signature of Debtor 2 |
| Date | e 11/8/2017 | | Date |
| Did you attach additi | ional pages to Your Statement of | Financial Affairs for Individua | ls Filing for Bankruptcy (Official Form 107)? |
| ☑ No ☐ Yes | | | |
| Did you pay or agree | to pay someone who is not an at | torney to help you fill out ban | kruptcy forms? |
| ☑ No | | | |
| Yes. Name of pers | son | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debi | or 1 Oscar A Avila Case number (ff known) First Name Middle Name Last Name | |
|------|---|---|
| 16, | Calculate the median family income that applies to you. Folicw these steps: | P. Charles |
| | 16a. Fill in the state in which you live. | |
| | 16b. Fill in the number of people in your household. 3 | |
| 17. | 16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? | \$78,559.00 |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3, Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | |
| Part | Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | a T |
| 18. | Copy your total average monthly income from line 11. | \$2,454.59 |
| 19. | | |
| | 19a. If the marital adjustment does not apply, fill in 0 on line 19a. | -\$0.00 |
| | 19b. Subtract line 19a from line 18. | \$2,454.59 |
| 20. | Calculate your current monthly income for the year. Follow these steps: | <u> </u> |
| | 20a. Copy line 19b. | \$2,454.59 |
| | Multiply by 12 (the number of months in a year). | x 12 |
| | 20b. The result is your current monthly income for the year for this part of the form. | \$29,455.08 |
| | 20c. Copy the median family income for your state and size of household from line 16c. | \$78,559.00 |
| 21. | How do the lines compare? | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | |
| | Line 20th is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. | |
| Part | Sign Below | |
| | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Signature of Debtor 1 Signature of Debtor 2 | Angel September |
| / | Date 11/8/2017 Date MM/DD/YYYY | |
| / | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from lin above. | e 14 |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Avila, Oscar A | Case No | |
|---|------------------------------|--|-------------------------|
| 000500000000000000000000000000000000000 | Debtor(s) | | |
| | | Chapter. Cha | pter13 |
| | VERI | TICATION OF CREDITOR MATRIX | |
| The a | above named Debtors hereby v | rify that the attached list of creditors is true and correct | et to the best of their |
| knowledge. | | | |
| | | V | |
| | | 1 OA | 1 |
| Date: | 11/8/2017 | /s/ Avila, Oscar A O ACO | - G Char |
| | | Avila, Oscar A | |
| | | Signatůre of Debtor | |